

**OHA - Drinking Water Services - Surface Water Quality Data Form**  
**Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems**

County: **Lincoln**  
 Month/Year: **Jun-22**

<b>System Name:</b>		<b>Seal Rock Water District</b>		<b>ID#:00-798</b>		<b>WTP : TP - C</b>	
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day <sup>1</sup> [NTU]
1	off	off	off	off	off	off	
2	off	off	off	off	off	off	
3	off	off	off	off	off	off	
4	off	off	off	off	off	off	
5	off	off	off	off	off	off	
6	off	off	off	off	off	off	
7	off	off	off	off	off	off	
8	off	off	off	off	off	off	
9	off	off	off	off	off	off	
10	off	off	off	off	off	off	
11	off	off	off	off	off	off	
12	off	off	off	off	off	off	
13	off	off	off	off	off	off	
14	off	off	off	off	off	off	
15	off	off	0.04		off	off	
16	off	off	0.04		off	off	
17	off	off	0.03		off	off	
18	off	off	off		off	off	
19	off	off	off		off	off	
20	off	off		0.08	off	off	
21	off	off		0.04	off	off	
22	off	off		0.03	off	off	
23	off	off		0.03	off	off	
24	off	off		0.04	off	off	
25	off	off		0.06	off	off	
26	off	off	off	off	off	off	
27	off	off		0.07	off	off	
28	off	off		0.03	off	off	
29	off	off		0.02	off	off	
30	off	off		0.03	off	off	
31							

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>				<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup>		<b>YES</b>		CT's met everyday? (see back)	
All daily turbidity readings ≤ 5 NTU?		<b>YES</b>		All Cl2 residual at entry point ≥ 0.2 mg/l?	
				<b>YES</b>	

<b>Notes:</b>	<b>PRINTED NAME:</b> Larry W Estes	
	<b>SIGNATURE:</b> Larry W Estes	<b>DATE:</b> 07/08/2022
	<b>PHONE #:</b> ( 541 ) 563-7715	<b>CERT #:</b> T-09229

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. <sup>2</sup> Filtered systems only.

## OHA - Drinking Water Services - Surface Water Quality Data Form

WTP - : C

System Name: Seal

ID#: 41 -00798

Month/Year: 06-15-30-2022

Disinfection *Giardia* Log

Inactiv:

0.5

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15	0.537	58.04	31.2	58.22	7.44	0.5	YES	
16	0.572	71.6	40.9	57.87	7.37	0.5	YES	
17	0.359	87.93	31.6	57.84	7.32	0.5	YES	
18	0.000	0	0.0	58.66	7.22	0.4	off	off
19	0.000	0	0.0	58.71	7.19	0.4	off	off
20	0.229	96.74	22.1	58.55	7.20	0.4	YES	
21	0.096	75.08	7.2	59.16	7.34	0.4	YES	
22	0.296	19.96	5.9	59.54	7.34	0.4	YES	
23	0.253	107.36	27.1	59.75	7.28	0.4	YES	
24	0.795	75.12	59.7	60.00	7.38	0.4	YES	
25	0.390	19.96	7.8	60.62	7.50	0.4	YES	
26	0.000	0	0.0	0.00	0.00	4.2	Off	off
27	0.680	36.39	24.7	60.81	7.36	0.4	YES	
28	0.589	22.21	13.1	61.11	7.79	0.5	YES	
29	0.021	48.27	1.0	60.11	7.80	0.5	YES	
30	0.214	49.46	10.6	61.08	9.73	1.3	YES	
31								

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised July 2018

Return by 10th of following month by email, fax, or mail to:

dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350

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